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APPLICATION NO.	FILING DATE	<u> </u>	FIRST NAMED INVENTO)	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/699,786 11/04/2003 Michael Ellsworth Weedmark ALC 3095 5910 TITLE OF INVENTION: PROTECTED AND HIGH AVAILABILITY PATHS USING DBR REROUTE PATHS						
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DU	E DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	12/09/2010
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS	12/07/20	10 SZEWDIE2 00000150	122325 10699786
CHERY, DADY		2461	370-225000	01 FC:15		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, fist (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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5. Change in Entity Status a. Applicant claims S			b. Applicant is no lo	nger claiming SMAI	LL ENTITY status. See 37 (CFR 1.27(g)(2).
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Alexandria, Virginia 22313	-1430.				he public which is to file (ar minutes to complete, includi imments on the amount of t Trademark Office, U.S. Del S. SEND TO: Commissioner displays a valid OMB contro	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete part you for Commerce, P.O. for Patents, P.O. Box 1450, ol number.

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PART B - FEE(S) TRANSMITTAL Complete and send this orm, togethe with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 DEC 0 7 2010 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 INSTRUCTIONS: This form sould be used for consmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below of a property of the property o maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 76614 7590 09/09/2010 Certificate of Mailing or T Terry W. Kramer, Esq. I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Kramer & Amado, P.C. 1725 Duke Street, Suite 240 Alexandria, VA 22314 (Depositor's name) (Signature) (Date) CONFIRMATION NO. ATTORNEY DOCKET NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ALC 3095 5910 10/699.786 11/04/2003 Michael Ellsworth Weedmark TITLE OF INVENTION: PROTECTED AND HIGH AVAILABILITY PATHS USING DBR REROUTE PATHS DATE DUE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE NO \$1510 \$300 \$0 \$1810 12/09/2010 nonprovisional **EXAMINER** ART UNIT CLASS-SUBCLASS CHERY, DADY 2461 370-225000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list I Kramer & Amado P.C. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Number is required. listed, no name will be printed. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) ALCATEL LUCENT Paris, France Please check the appropriate assignee category or categories (will not be printed on the patent): Undividual 🔀 Corporation or other private group entity U Government 4a. The following fee(s) are submitted: Issue Fee 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. *୲a -a3a*5 Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required ree(s), any deficiency, or credit any overpayment, to Deposit Account Number _______(enclose an extra copy of this fo Advance Order - # of Copies (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ■ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Typed or printed name Registration No.

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